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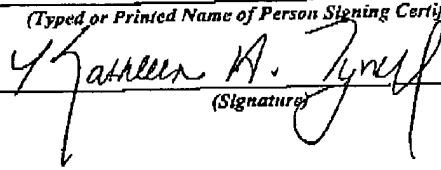
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BEST AVAILABLE COPY**December 21, 2005****TO: Examiner Kim M. Lewis****GROUP: 3743****FAX NUMBER: 571-273-8300****ATTORNEY DOCKET NO.: KUZ-0023****SERIAL NO.: 10/530,123****FILED: April 1, 2005****NUMBER OF PAGE: 7****MESSAGE:** Attached please find Amendment Transmittal Letter; Amendment Under 37 C.F.R. §1.312; and Certificate of Transmission by Facsimile.**Kathleen A. Tyrrell, Registration No. 38,350****URGENT! PLEASE DELIVER IMMEDIATELY
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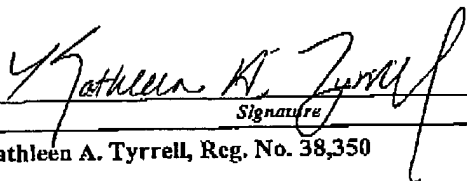
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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. KUZ-0023
Applicant(s): Muta et al.			
Application No. 10/530,123	Filing Date April 1, 2005	Examiner Lewis, Kim M.	Group Art Unit 3743
Invention: Patch			
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I hereby certify that this <u>Amendment Under 37 C.F.R. §1.312 (a)</u> <small>(Identify type of correspondence)</small>			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u>)			
on <u>December 21, 2005</u> <small>(Date)</small>			
<u>Kathleen A. Tyrrell</u> <small>(Typed or Printed Name of Person Signing Certificate)</small>			
 <small>(Signature)</small>			
Note: Each paper must have its own certificate of mailing.			

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. KUZ-0023	
Applicant(s): Muta et al.					
Application No. 10/530,123	Filing Date April 1, 2005	Examiner Lewis, Kim M.	Customer No. 26259	Group Art Unit 3743	Confirmation No. 2647
Invention: Patch			BEST AVAILABLE COPY		
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	10 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ Signature Kathleen A. Tyrrell, Reg. No. 38,350			Dated: December 21, 2005		
cc:			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence		

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No.: KUZ-0023
Inventors: Muta et al.
Serial No.: 10/530,123
Filing Date: April 1, 2005
Examiner: Lewis, Kim M.
Customer No.: 26259
Group Art Unit: 3743
Confirmation No.: 2647
Title: Patch

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I hereby certify that this document is being facsimile
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the date shown below.

On December 21, 2005


Kathleen A. Tyrrell, Registration No. 38,350

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Amendment Under 37 C.F.R. §1.312 (a)

Please enter the following amendment and remarks into
the record.

Amendments to the claims are reflected in the listing
of claims which begins on page 2 of this paper.

Remarks begin on page 4.